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ABSTRACT

This paper examines the attitudes of adults and teenagers in 10 predominantly rural Alaskan communities toward their own health and well-being and that of children and families in their community. The communities were located across the state and ranged in size from populations of under 900 to over 50,000. The proportion of Alaska Natives in the communities varied from practically none to almost all. The focus groups included 267 participants. Half were teens recruited from schools and community organizations; one-quarter were Alaska Natives; about three-quarters were women and had completed high school. The focus groups chose from among a list of previously identified topics: basic family needs, child abuse, domestic violence, substance abuse, health services, teen pregnancy, and juvenile crime. Each focus group identified community problems in these areas, community strengths and resources that contribute to the health and well-being of adults and youth, and possible effective change strategies. These strategies involved teen participation, community-based problem solving, stories as educational tools, availability of health promotional materials, community-based paraprofessional delivery systems, changes to community norms, cross-generational community activities, parenting education, peer counseling and natural support programs, teen activities, public recognition of domestic violence and abuse, and parent-teen discussions of sexuality. Results are detailed for each of the communities: Barrow, Delta Junction, Emmonak, Homer, Mat-Su Valley, Metlakatla, Mountain View, Selawik, Unalaska and Dutch Harbor, and Yakutat. (SV)

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ED 414 116

Alaskan Voices

A report of conversations with individuals and groups in 10 Alaska communities regarding their issues, strengths, and needs related to families and children.

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Alaskan Voices

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- The local community coordinators who served as guides during the community visits; found meeting rooms for all the events; ensured that a wide diversity of community members were invited to participate in the focus groups; and informed the public about meetings.

May 1997

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Alaskan Voices

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Dear Fellow Alaskans:

Late in 1995, a number of colleagues and I had the opportunity to visit ten communities across the state to hear directly from individuals representing every segment of these communities. They told us of their concerns, described individual and community strengths and told us about their needs for support relative to the health and well-being of the families and children in their community. In each community we conducted focus groups on topics the community had selected, had a town meeting and talked individually with folks wherever we met them. We had lunch at a Senior Citizen's Center, visited schools and met people in the grocery stores. Everywhere Alaskans meet and talk in their communities, they met and talked with us.

Focus group participants represented a broad mix of individuals who might not otherwise have ever come together. They were young, they were elders, they were from various cultural groups, they were service providers and consumers and each cared deeply about his/her community. The focus group topics were difficult and ones, we learned, that are frequently regarded as taboo for public discussion. Child abuse, domestic violence, substance abuse and teen pregnancy were four of the topics discussed openly and, in many cases, from a personal experiential viewpoint. Participants listened respectfully to difficult stories about difficult issues and then talked together about how to address the identified problem. The openness, honesty and concern that was put forward in all of these discussions was truly a gift to us and everyone present.

This document is our best attempt to summarize and interpret our many "conversations." You will find on these few pages messages of concern for children, families and communities, especially those most vulnerable; a deep commitment to solving problems locally; and examples of innovative strategies already in place. We believe our findings have implications for policy makers and community members alike.

Alaskan Voices are clear and strong! They do not hesitate to identify and discuss difficult and sensitive problems, they clearly articulate their strengths and those of their communities and they are committed to resolving their own problems with a little help/support from their "friends." Thank you to everyone in the communities we visited for letting us hear your voices and for allowing us to share your message statewide.

Sincerely,

Karen E Pearson

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Community Problems-Community Solutions: Findings From Focus Group Interviews in Ten Alaskan Communities

This report addresses how adults and teens in ten Alaskan, predominantly rural, communities view their own health and well-being and that of the children and families in their community. Between October 3 and December 15, 1995, staff from the Section of Maternal, Child and Family Health, with contract support from the Alaska Center for Rural Health and the Institute for Circumpolar Health Studies (ICHS) conducted a series of focus groups[1] in ten communities. In these groups, participants discussed community health and human service problems, strengths their communities could build upon to help resolve those problems, and opportunities to improve the health and well-being of individuals and families in their communities.

Focus group leaders were the chief and a unit manager from the Section of Maternal, Child and Family Health who had received training in conducting focus groups. In an effort to reduce inconsistencies in the content and approach to data collection within and across the ten communities, all focus group discussions were moderated by these two persons, with the exception of one group in Barrow. Each moderator was supported by an ICHS staff person, who was responsible for taking careful notes, recording the discussions on audio tape, and verifying the group's discussion at the end of each focus group.

Selection and Characteristics of the Communities

Ten communities across the state invited the Section of Maternal, Child and Family Health to conduct focus groups and hold public forums on health and human services. As is shown in Table 1, although predominantly rural, these communities differ from one another along several important dimensions, including population, size and ethnicity. Several of the communities have populations under 900, three have between 4,000 and 4,500 people and one, Mat-Su Borough, has more than 50,000. These communities also represent

[1] A focus group is typically composed of seven to ten participants selected because they have certain knowledge of, or relationship to, a particular topic or issue. The focus group leader creates a permissive, nonthreatening environment where individuals feel free to discuss areas of interest. The creation of a safe environment encourages discussion of sensitve topics. The leader guides participants through an indepth discussion using a prearranged schedule of probing questions. Experience has shown that participants are often more forthcoming in their expression of opinions and feelings than they might otherwise be in groups composed of family members or coworkers. Thus, information collected from focus group discussions often provides more depth than public opinion surveys and greater objectivity than key informant interviews.

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Table 1. Characteristics of Communities and Participants

	Community Characteristics		Characteristics of Focus Group Participants				
Community	Population Size	% Alaska Native	Sample Size	% Alaska Native	% Teen	% Male	% HSHDS* with Children
Barrow	4,000	65	20	25	20	20	70
Delta Junction	800	>5	39	0	18	49	67
Dutch Harbor/Unalaska	4,300	>10	16	25	50	69	75
Emmonak	762	92	25	96	48	54	96
Homer	4,400	>4	41	10	59	22	78
Mat-Su Borough	50,601	4.2	28	0	0	52	50
Metlakatla	1,540	84	38	71	45	50	76
Mountain View	n/a		10	0	80	40	90
Selawik	648	96	23	83	39	30	96
Yakutat	724	91	27	59	26	52	74

* HSHDS = Households

Alaska's diverse racial/ethnic composition. For example, the vast majority of residents in Delta Junction, Homer and the Mat-Su Borough are of European descent. In Yakatut, half the population is Alaska Native; and several of the smaller communities are majority Alaska Native.

Selection and Characteristics of Focus Group Participants

In each of the ten communities, a local coordinator recruited participants for the focus groups. Most of the coordinators were associated with the human services network—for example, through Indian Child Welfare Services, a state agency or grantee organization.

Participants for the focus groups were recruited through the media and personal invitation. To the extent possible, the composition of the groups reflected the character and diversity of the community along several dimensions, including age, gender, race/ethnicity, educational attainment and household income. However, since the participants were selected by coordinators affiliated with the social services network, a potential bias may be that the adults and teens recruited are those involved in one or more community activities (e.g., the youth were

selected from schools or youth programs). Their views may not represent those of adults and teens who are not affiliated with formal institutions or involved in community activities.

Across the ten communities, 267 residents participated in the focus groups. As is shown in Table 1, half of the focus group participants were teens who were recruited from schools and community organizations. One quarter were Alaska Natives, which closely approximates the ratio of Alaska Natives to non-Natives in rural areas of the state. About three-quarters of all participants were women and had completed high school.

The majority of participants were from households with children between the ages of 2 and 15. Annual household income ranged from under $10,000 to over $75,000, with half earning less than $50,000.

Selection of Topics for the Focus Groups

Across the ten communities, local coordinators were asked to review with colleagues findings from the final report of the "Family Preservation and Needs Assessment," prepared by the School of Social Work at the University of Alaska-Anchorage in 1995, and selected topics judged to be most relevant to their communities.

Table 2 presents a summary of the topics selected by each of the ten communities. Child abuse was the topic selected by the largest number of communities (n=6), followed by domestic violence and substance abuse. It is important to

Table 2. Focus Group Topics Selected by Communities*

	FOCUS GROUP TOPICS						
Community	Basic Needs	Child Abuse	Domestic Violence	Substance Abuse	Health Services	Teen Pregnancy	Juvenile Crime
Barrow			x		x	x	
Delta Junction		x	x				x
Dutch Harbor/ Unalaska		x					
Emmonak		x	x				
Homer		x		x		x	
Mat-Su Borough	x			x	x		
Metlakatla		x	x	x			
Mountain View**							x
Selawik	x	x					
Yakutat	x			x			x

* In addition,5 communities chose additional topics deemed relevant to their local situation.
** Only one focus group was held in Mt. View, as at the time the community was having many meetings and organizational efforts on its own in response to problems that had been self-identified. This activity began after the community decided to participate but before groups could be scheduled.

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note, however, that these topics are not discrete. It is readily apparent in the transcripts and field notes of the discussions that communities perceive a high degree of overlap in these topics. For example, only four communities selected substance abuse as a topic, but it arose as a concern in all ten communities—in the context of discussions about family violence, juvenile crime, teen pregnancy or health.

Town Meetings

In addition to the focus groups, town meetings were held in each of the ten communities. Local coordinators advertised the meetings in newspapers, radio announcements, flyers and word-of-mouth. Town meetings were open to everyone and a sizable number of focus group participants attended. Because there was no fixed agenda, community members were free to raise issues and concerns that were not addressed in the focus groups.

Information Processing and Analysis

Information from all focus groups and town meetings was recorded in detailed field notes. At the end of each session, these notes were summarized for the groups and participants were asked to correct any errors or add material that they thought important or relevant to our understanding of the issues. These notes became the primary source of information used to prepare these community-specific and cross-site summaries of findings.

Summary of Major Findings

The purpose of this study was to understand better the fit between the life circumstances of Alaskans and current policies and practices that aim to improve their health and well-being. Although focus groups do not provide the statistical assurance of some other study methods, they do allow a depth of examination, a sense of real life conditions and complexity and an authenticity of voice that is often illuminating. Since the majority of the communities visited were rural or semi-rural, the findings most heavily reflect input from these groups. The following presents a summary of what we learned about major community health problems in Alaska, the resources and needs of communities wishing to address them, and implications for policy and practice.

The Nature and Causes of Major Community Health Problems Across Alaska

Despite diversity in the history, economic and natural resources, culture and characteristics of the people in the ten communities, they share many common problems, including:

- **Many communities are struggling to meet the basic needs of families.**

  Although Alaska is among the wealthier states in the union, many children are growing up in families that do not have access to adequate housing, clean water, or basic health care. Further, many of these families are low income and no longer have reliable access to traditional subsistence food sources.

  Adequate Housing. Focus group participants in Barrow, Selawik, Mat-Su and other communities talked about the intense need of families for safe and affordable housing. An example is the housing situation for families in Mat-Su. The population has more than tripled in less than ten years and construction of affordable housing has not kept pace with the growth. As a result, many families are subsisting in small shacks that are neither healthy nor safe, due to overcrowding and substandard construction.

  Access to Clean Water. Participants reported that many community members do not have year-round access to clean water or access to sewage systems. This was identified as a major public health problem in Selawik, where only schools and clinics have plumbing and sewer systems. The remainder of the town hauls water to their homes and businesses and uses "honey buckets." In the winter, when the water is turned off, community residents are vulnerable to waterborne diseases caused by consumption of dirty ice and/or storage containers. Efforts made by outsiders to solve these problems have been inappropriate and unsuccessful.

  Subsistence or Income. For many families in Alaska, opportunities for year-round employment are scarce. At the same time, modern settlement patterns, commercialization of basic needs and laws limit many families in their access to food outside the cash economy. In addition to undernourishment of children, pregnant women and others, many families cannot afford to participate in preventive or primary health care services.

Access to Basic Health and Social Services. In many communities, citizens do not have access to basic health care and social services. Most needed are primary health care services for children, reproductive health services and education that are youth-friendly, counseling and mental health services—especially for children and youth, shelters for battered women and their children and homeless families, and treatment programs for perpetrators of domestic violence, child abuse and juvenile crime. In Mat-Su Borough, where many of these services are offered, many residents in outlying areas do not have, or cannot afford, transportation. As a result, many problems are not brought to the attention of health and social service providers until they are serious or life-threatening.

Also, in many communities health and human service agencies are understaffed. As a result, service providers are overwhelmed and are able to respond only to some of the more serious problems. In Mat-Su Borough, child protective service workers are able to respond quickly or effectively to only the most serious allegations of child abuse and neglect.

- **Health and human service delivery systems often do not address local circumstances and needs.**

Many communities expressed strong views that centrally administered programs delivered by itinerant workers are not responsive to local circumstances and needs. Further, they do not provide the continuity or intensity of services that are needed or build the capacity of communities to help themselves.

- **Alcohol and/or drugs are major problems for adults and adolescents.**

In all ten communities, focus group participants talked about the serious and damaging effects of alcohol on the health and well-being of adults, teens, children and infants. In addition to alcohol, adults and teens in several communities said abuse of drugs (illegal, controlled and over-the-counter) and use of other substances (e.g., inhalants such as hairspray) are also serious and growing problems.

Alcohol—and in some communities, other drugs—are easily accessible to adults and youth. Alcohol and/or other drugs have become woven into the social fabric of communities. Throughout the state, adults and teens told us that alcohol is an accepted part of everyday life in Alaska. As one teen in Homer put it: "Substance abuse is tolerated... it's just the way it is here." Adults told us that it is rare to attend a social event of any kind where alcohol is not served.

Alcohol and/or other drugs are associated with many other social and public health concerns. Throughout the state, focus group participants told us that alcohol is associated with a host of other social and public health concerns, including domestic violence, child abuse and neglect, teen pregnancy and juve-

nile crime. In addition, they report that some women drink throughout their pregnancies, resulting in a high incidence of children with fetal alcohol effects. Many of these children experience problems in their adjustment to school and society, and require intensive social support and services throughout their lives.

Enforcement of laws written to protect public health and well-being are often not enforced. In Alaska, rural communities may elect to be either "dry", "damp" or "wet." In dry communities, the sale and consumption of alcohol is illegal. However, these strictures are enforced inconsistently in many communities. For example, focus group participants in Emmonak, a dry community, told us that bootlegging and home-brewing are widespread. In Mat-Su Borough, where DWI arrests are at a record high and Alcohol Safety Action Programs have approximately 100 new intakes every month, participants expressed concern that bartenders are not penalized for serving drunken customers.

Insufficient attention to prevention and treatment of alcoholism and addiction. Many communities in rural Alaska do not have drug treatment facilities. As a result, persons must either commute long distances or leave their homes and families to get treatment. This situation challenges long-term recovery, since initial treatment is received outside the context where the problem occurs and post-treatment support is limited or nonexistent.

Even where community-based treatment and follow-up services are available, they are often insufficient. For example, residents of Barrow told us the program there is so burdened with court-ordered cases that persons voluntarily seeking help are often turned away. Throughout the state, participants expressed special concern over the limited number of treatment programs for youth.

- **Domestic violence and the abuse and neglect of children and youth are serious problems.**

In rural communities throughout Alaska there exists a "code of silence" that masks the extent of domestic violence and child abuse or neglect. Across the state, adult and teen focus group participants told us that family violence is a pervasive and serious problem in their communities. As one participant described it: "Our communities are small... We can see the same person three or four times in a day, so we know when they are battered." Despite awareness, domestic violence is rarely discussed openly or reported to the authorities. Underlying this culture of silence, we were told, are beliefs that:

  - Domestic violence is a private matter between two intimate adults;

  - The woman is somehow responsible for the violence—either by provoking it or failing to change the man's behavior; and

- Public involvement in the lives of families is intrusive and/or likely to exacerbate the family's problems.

Women internalize the oppression. Women internalize community attitudes and beliefs that underlie the culture of silence—believing that they are somehow to blame for the abuse. As one woman put it: "I was told that this is my job... I felt I had failed... I should be able to reform my man." Also, like their neighbors, many battered women do not trust public agencies to act in their best interests. Their worst fears are that outside intervention may exacerbate their situations or result in separation from their children. These conditions preclude opportunities to intervene in the early stages of abusive relationships.

Domestic violence has far-reaching effects on children, youth and communities. Focus group participants also talked about the effects that domestic violence has on children and youth growing up in those households. Some children and youth are physically abused; others, especially those where alcohol is a problem, suffer from neglect. Several teenage focus group participants observed that children and youth from violent homes, whether or not they are physically abused, act-out in the community arena—experiencing adjustment problems in school, running away from home, experimenting with alcohol and drugs, and engaging in crime.

- **Juvenile crime, teen pregnancy and abuse of alcohol and other drugs are pervasive in Alaskan communities.**

Throughout Alaska, adults and teens talked about the prevalence of crime, pregnancy and alcohol and other drug use among youth. The following presents a summary of their perceptions of these problems and their underlying causes.

Adults and teens agree that communities do not provide youth with the structure and opportunities they need to develop healthy and productive interests. Many communities do not provide youth with sufficient opportunities to participate in constructive programs or activities outside of school. Only three of the ten communities we visited had viable teen centers. Three other communities had facilities that teens could use, but they either lacked sufficient funds, offered a narrow range of activities that interested few youth or were reserved frequently by adults who wanted to play Bingo. Participants said that many young people get in trouble because they are bored. As one teen from Selawik put it: "There is nothing to do, so you just go out and find something... get drunk, get high, get pregnant."

The productive role of children and youth in families has disappeared. Many of the adult focus group participants expressed concern over changes in the roles of youth in families and parent-child relationships. In previous generations, children and youth made valuable contributions to their families' survival or mainte-

nance—fishing or hunting for sustenance, collecting firewood and other chores. Through these activities, youth developed healthy concepts of themselves and felt connected to the work and life of the family. Many focus group participants told us that modern conveniences and lifestyles leave youth with little or no opportunity to contribute to their families in a meaningful way. One participant in Selawik summed it up as follows: "This is the instant generation.... With store-bought food, microwaves and fast snow machines, there's no need to prepare for winter."

Adults and youth do not communicate effectively with one another. Many groups discussed the breakdown in communication between parents and their children and, more generally, between elders, teachers and other community adults and youth. Youth especially indicated a desire to improve this communication but didn't feel they had the tools to do so or that adults were particularly interested in what they had to say.

Parents feel they have little or no control over their children. Individuals in a variety of groups expressed concerns that many parents lack the skills required to raise healthy, well-adjusted children. Many parents, we were told, do not know how to discipline their children without resorting to physical punishment and complain that the state has disempowered them through enactment of laws protecting children from corporal punishment. Participants themselves indicated they had not always known how to parent and wished there had been opportunities to learn parenting skills when their children were young. Participants also mentioned that many parents use rough language with their children or are abusive. Children in these households internalize messages that they are not worthwhile human beings and behave accordingly—seeking love through intimate relationships at a young age, resulting in pregnancies; abusing alcohol and other drugs to self-medicate; engaging in criminal activity; and running away. Although most communities offer classes in parenting, they are generally poorly attended—in part, because they are taught by outsiders who are not familiar with the needs and concerns in the local community.

Building Healthy Communities: Community Strengths and Readiness for Change

In every focus group, participants were asked to identify resources and strengths in their communities that currently contribute to the health and well-being of adults and youth and/or have the potential to do so in the future. A summary of the most frequently mentioned responses across communities follows. (Beginning on page 27 are detailed information for each of the individual communities.)

- **Community Organizations.**

  In all ten communities focus group participants identified at least one established program or service center that was available to address one or more specific local need. For example in Barrow, focus group participants mentioned the revival of the Mother's Club, a group of women who visit homes and disseminate information on effective parenting techniques, hygiene and other topics. They also mentioned the Domestic Violence Center and special health programs broadcast by their local public radio station. Yakutat has a health and human service provider network that is responsive to the needs of the community, and Mat-Su Borough, a Children's Services Task Force. Participants in Homer and Delta Junction mentioned the important role that support groups for recovering alcoholics played in their communities. In Metlakatla, participants counted a community-based program for youth among their assets. In Selawik, the "Younger Generation" was viewed as a very positive force in the community. Started by an individual that chose sobriety and supported by a local pastor of the Community Friends Church, the movement now includes a growing number (20+) of adults living and promoting sobriety in the community.

- **Community Elders**

  In every focus group, elders were identified as important assets and resources in communities. Both adults and teens said that elders have valuable experience and knowledge about childrearing; local culture, values and traditions; and prevention of disease. Many teens said they felt disconnected from their elders. However, they expressed a strong desire to reconnect with them and benefit from their advice and support. They suggested organizing volunteer youth groups who could adopt grandparents at the local senior center and setting aside time and space where elders and youth could discuss issues at teen centers.

- **Schools & Churches**

In several communities, focus group participants identified strong health education programs in their school systems. For example, the Yakutat School System offers a curriculum that promotes healthy lifestyles through education and open discussion of sensitive topics. In addition, their academic curriculum is strong and participants expressed pride in the large number of youth who complete college and return to work in the community.

Adults and teens in several other communities were not satisfied with their local schools involvement in health education. They identified opportunities for schools to expand mental health and counseling services and health education. Across the state, teens expressed an interest in reviewing sex education curriculums and making suggestions that would make the materials more interesting and relevant to their agemates and initiating peer education activities, including guerilla theater, articles in student newspapers that address teen health concerns, and a speakers bureau. Focus group participants in Mat-Su Borough were least optimistic that their community schools would assume a more proactive role in health education. Parents in the Borough, they said, would resist nonacademic additions to the curriculum.

In most communities, participants stated churches do not address social problems and have weak connections to health and human service providers in the community. In all ten communities, focus group participants said that churches represent an untapped resource.

Summary and Conclusions

Findings from these discussions with adults and teens in ten Alaskan communities suggest that a positive environment exists for the Governor's initiatives that emphasize the health and well-being of Alaska's children, families and communities:

- Participants share the Governor's concerns about health, juvenile crime and substance abuse;
- They support a preventive approach;
- They believe that positive change is possible; and
- They are ready and willing to take action.

Still, as these discussions made clear, awareness of problems and motivation to change are necessary, but not sufficient, elements of change. Communities confront a number of obstacles to their efforts to provide children and families with services that support and sustain healthy living conditions and life choices.

Recommendations

To help communities overcome obstacles and capitalize on their motivation to change, participants made the following recommendations:

- **Policies and practices that support mobilization of resources and coordination of services at the institutional level.**

  It is clear from the discussions that a number of the major health and social problems confronting communities in rural Alaska are interrelated. Participants in every community, for example, attributed juvenile crime, teen pregnancy and abuse of substances with inadequate provision of activities for youth. The few youth programs that exist, do not necessarily or effectively address these problems. Likewise, child protective service workers rarely raise issues of spousal abuse, though child and partner abuse are often concurrent problems. This may be due to lack of resources to investigate beyond the very limited definition of their role. Categorical approaches to community health problems are not effective in providing for the range of interrelated needs and circumstances experienced by individuals, families, service providers and institutions, especially in rural Alaska.

  Institutional collaboration and coordination need to be developed at the state level before they can be implemented effectively at the local level. These changes might involve an increase in noncategorical funding streams and incentives for institutions and agencies that work together. Mobilizing assets and coordinating services at the institutional level will improve the ability of these institutions to meet the needs of children and families effectively and efficiently—especially those who reside in remote rural areas.

- **Policies and practices that support active, consequential participation of communities in defining and prioritizing problems, as well as in processes of planning and implementing strategies.**

  Participants identified three major components of local participation issues: local knowledge, local rights and sustainable change. They expressed the belief that members of the local community understand the needs, opportunities, priorities and special dynamics at work in their communities in ways that professional outsiders—policymakers and service providers—do not. Even if the identification of needs does not differ (e.g., when local communities and state-level policymakers agree that communities need to address alcohol consumption among women in their childbearing years), local knowledge may provide important insight into how this might be carried out and by whom. Further, they expressed strongly that individuals and local communities and cultures have a right to influence policies and practices that affect them. Finally, they believe that a certain redistribution of power—from the state to communities and

citizens—is necessary for developing programs that are acceptable and sustainable. This includes involvement of community residents in activities that will develop the skills, experience and capacity to plan and implement local policies, programs and projects. This will develop local leadership and service providers in ways that will enable communities, agencies and individuals to act on their own behalf.

- **Policies, practices and resources that support prevention programs and activities, as well as intervention.**

  Participants expressed a need and desire for developing or expanding activities and programs that are oriented toward prevention of health and social problems in their communities. A number of specific suggestions were made, including community education (e.g., through the local media, as well as school curricula, peer education and parenting classes), constructive activities for youth (e.g., development of teen centers with a wider selection of activities, including community service) and adult activities that do not involve alcohol; educating adults about how to talk to youth about sex; and devising strategies for providing women and children with preventive health care.

Effective Strategies for Positive Change

While there is no strategy that will be effective in every community, participants identified the following as likely to bring about positive change.

- **Consult With Teens**

  We spoke with a number of youth who after living on the streets, being involved in heavy substance abuse, or having an unplanned pregnancy, had returned to their communities and are now enrolled in alternative schools. The students we talked with were very committed to completing their education and pursuing long term goals of self-sufficiency. They spoke of what had contributed to their flights from family and community and efforts put forth by organizations to reach them when they were most troubled. All agreed that "labeling" and exclusion had not been helpful to them. They offered suggestions for parents and professionals dealing with troubled youth.

- **Use the Focus Group Process for Facilitating Community Based Problem Solving**

  Those participating in the focus group process stated they enjoyed it. After short discussions of the problems, all groups immediately launched into problem solving. Many participants felt that they would like to do more focus group work in their communities. Critical elements of focus groups that seemed to contribute to a constructive process:
  - Group size of 7-10 people;
  - Groups with community members of different ages and points of view, with a diversity of experience and backgrounds;
  - A neutral facilitator and a recorder who summarizes discussions for the group;
  - A process that seeks identification of problem issues but does not seek consensus;
  - A focus on community strengths and identification of strategies that community members could implement with support from others.

- **Use Stories as Educational Tools**

Everywhere we went, we heard from people that they learn best from hearing stories of how other people have faced and overcome adversity or challenges in their lives. These stories seem to have a powerful ability to inspire others in decision making for their own lives. Several teens in Barrow referenced a national teen magazine article written by a teen who had been sexually abused as a child and discussed the impact the article had on their lives. In another community we heard of the powerful impact made on a community when a young man with advanced cancer of the mouth and throat traveled to that village and shared a message on the dangers of tobacco use. In Selawik we heard how a video (*The Honor of All*) of people who had achieved sobriety in their community had inspired a number of people in Selawik to achieve sobriety. Personal testimonials, radio, television, video, magazines, and comic books all were put forward as appropriate ways to get stories out.

- **Seek New Places for Having Educational Materials Available**

Traditionally local clinics are places where health promotional pamphlets are available. Community groups suggested having these materials available at washeterias, post offices, community stores and other gathering points in the community.

- **Develop Community-based Paraprofessional Delivery Systems**

Residents of non-regional hubs want services that are available continually, not just on an itinerant basis. Over and over again, we heard that those who have learned from life's experiences are valued as teachers by community members. There are also community-based people ready and willing to begin this work. Establishing a development/support system for community-based providers may be a means to meet this need.

- **Support Efforts to Change Community Norms**

We met community people working in their communities who were making a difference. They felt that they had benefited greatly from having the opportunity to attend conferences in regional hubs on specific topics and were sharing what they learned with others in their community. It is especially helpful when more than one community member gets training in a given area. Several people with a specific knowledge base can work as a team designing community-based programs or activities designed to help others in the community gain information. In one community, the suicide prevention grant coordinator had organized, with

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a great deal of community involvement, an evening's activity that focused on drug/alcohol abuse and included all age groups. Her efforts were further supported by a guest speaker from a regional hub. Community members were very excited about her efforts. Through efforts similar to this, changes in community norms can be promoted.

- **Promote Cross Generational Community-based Activities**

In many communities we heard concerns that many organized activities in the community are geared for one specific age group. Teens and young adults expressed a strong interest in having activities that involve community members of different ages and promote communication between generations.

- **Develop Age Appropriate Responsibilities for Children of All Ages**

In almost every community, we heard from adults and teens alike, that children need to be given age appropriate tasks and responsibilities in their families and in their communities. This contributes to children's self-esteem and allows children to contribute in a positive way to their families and communities.

- **Foster the Development of Parenting Skills**

Many groups expressed concerns that parents of children of all ages lack the skills required to raise healthy, well-adjusted children. Many parents with out of control toddlers resort to ignoring the problem, yelling, using abusive language or resorting to physical punishment with their children in efforts to gain control. The problems escalate as the children move through adolescence. Many parents, we were told, believe their efforts to exercise control over their adolescents are hindered by state laws which protect children from corporal punishment.

Parenting classes are offered in many communities. Community members noted however, that classes are often poorly attended and parents most in need of services do not voluntarily come for the classes. Reasons for poor attendance include: location and time of the classes and classes may not be the preferred delivery system for many parents. Some parents, ordered by the Division of Family and Youth Services to attend, felt they benefited by being mandated to attend classes.

Community members recognize the need to support parents early in their efforts at parenting. Although people talked about their desire and willingness to reach out and provide support to struggling parents, they feel that community norms sometimes prevent them from intervening. Problems escalate until someone finally calls in state authorities. This can result in removal of the child from the home, a solution that most find unsatisfying.

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Many parents expressed their desire to be good parents and welcomed guidance in this area. The guidance needs to be provided in a variety of ways including; the media, videos, printed materials, and counseling and support provided by readily available community people.

- **Promote Peer Counseling and Natural Support Programs**

A common theme heard in most communities we visited is the desire to learn from peers. Teens, in particular, would like to have an active role in educating other peers through plays, music, etc..

- **Develop More Activities for Teens**

While many communities have developed some activities for teens, most are limited to sports. Teens note that they have a variety of interests and would like a broader range of activities available to them.

- **Develop Effective Strategies for Dealing with Troubled Youth.**

Adults and youth in all ten communities expressed their concern for troubled youth. Many felt that vandalism is very common and that there are few if any consequences for theft, destruction of property, disrespectful interaction with others, substance abuse or behavior causing injury to others. All felt that there should be consequences for such behavior.

- **Break the Code of Silence**

One of the most commonly cited obstacles to combating health problems such as alcohol abuse, domestic violence, and child abuse is the "code of silence." Yet in each and every community we visited, we found people ready and willing to break that code by sharing personal stories, often for the first time. These individuals stated that it is time to break the code of silence that protects perpetrators and keeps individuals isolated.

With this sharing came expression of a desire to support others in the community who might be experiencing similar problems. One woman who drank heavily through several pregnancies shared her remorse at damaging her children. Sober now for several years, she has a strong desire to work with women in her own community to educate them about the dangers of drinking while pregnant. Other women, who had been sexually abused as children want to do what they can in their communities to prevent further victimization of children.

In one community a middle aged man publicly acknowledged the hardships he inflicted on loved ones and his community while drinking heavily as a young man. Sober now he is actively engaged in activities designed to work with youth, promote sobriety and advocate for community action supportive of children and families.

- **Support Parents in Their Efforts to Talk With Their Children About Sexuality**

  Parents and teens alike note that open discussions of sexuality do not happen often. Role playing, development and distribution of materials designed to promote this communication may help facilitate these discussions.

Barrow

Barrow is the northern most community in North America. With a population of almost 4,000, it is the center for business, communication, government, and transportation for the North Slope Borough. The North Slope Borough Government is the primary employer in this multi-ethnic community, 65% of whom are Alaska Natives.

Community Concerns

Legalization of Alcohol

The visit to Barrow occurred just after a community vote to turn Barrow back into a "wet" community after being "dry" for a year. During the "dry" period, Barrow experienced a dramatic decrease in alcohol related domestic violence, assaults, public drunkenness, and unintentional injuries. The legalization of alcohol in Barrow and the anticipated negative impacts on community, family, and individual health and well-being were discussed in the public forum and in all three focus groups. One participant said, "it feels like a war coming on." The campaign prior to the election and the election itself, polarized the community along many lines.

Child Rearing

There was concern expressed that many parents in Barrow are having difficulties raising their children. Focus group and forum participants felt children should be raised to be respectful of others, themselves, and the environment; have values; and be obedient. They also stated that children be assigned responsibilities within their homes that promote their sense of worth in the family and prepare them for future independence. Many observed that while Parenting Effectiveness Training Classes are offered, they are usually poorly attended. The community expressed a need for effective ways to work with parents to help them develop their parenting skills.

Cultural Transition

Focus group and community forum participants expressed their concerns about the rapid rate of change in their community. One individual stated, "There has been 200 years of change in 20 years." The roles of men, women, and children today are perceived as being very different from 15 years ago. The cultural composition of the community has changed rapidly as well and fewer speak the Inupiat language. Finally, focus group participants noted the "teen culture" is as important as being Native or rural Alaskan and should be considered in the design of health education and health services programs.

Housing Problems

Many participants indicated they believe the shortage of housing and the cramped quarters of small houses has had a negative impact on interpersonal relationships. One participant noted "people have been on housing lists for two to three years." There were also concerns that the design of some of the housing units does not support a subsistence lifestyle.

"Code of Silence"

Many focus group participants stated that the "code of silence" has been a major obstacle in combating domestic violence, child abuse, and teen pregnancy. Relative to domestic violence, one participant said, "we see the same person three or four times a day and we know if they have been battered." Domestic violence, child physical and sexual abuse, and teen pregnancy have not been discussed openly; as a result perpetrators have gone unrecognized and the violence has gone unpunished.

Teen Pregnancy

There was great concern expressed about teen pregnancy, yet it was not an easy topic to discuss. Community members stated that education is an important piece of prevention but note that parents often feel ill prepared to talk to their children about puberty and reproduction. The group felt that education should start very early and that role modeling would be helpful in preparing parents for discussions with their children. Participants felt the school system needs to do more in this area as well but the school system has resisted providing education in family planning and birth control.

Participants were aware that there is a strong connection between a child's self esteem and their ability to resist sexual advances and recognized that it is important to support building a child's sense of self worth. Participants were also concerned that older men are engaging in sexual relationships with teens and that teens who have been sexually abused as children seem to be at increased risk for pregnancy.

Health Services Shortage

All focus groups discussed the problem of availability and quality of physical health care services in Barrow, particularly for children. Readily available specialty care is an unmet need. Others noted the lack of adequate mental health counseling and alcohol treatment programs, especially for children and teens. There are few domestic violence offender services.

Need for Health Education

Focus group participants noted a need for health education in general. They were especially interested in nutrition education.

Community Strengths

Strong Sense of Values

Focus group members indicated that Barrow residents have a strong sense of values. Extended family and concerned residents provide help and support to one another. Elders and the wisdom they bring, are a valued asset.

Mother's Club

The Mother's Club, a church affiliated group active between the mid-1940s and mid-1970s, was viewed by many as having been a very positive force. Community women were very active in assuring the health and well-being of children and young families. Mother's Club members visited parents of young children and provided guidance and education in child rearing, health promotion, and housekeeping and helped enforce curfew laws for adolescents. There is an effort underway at this time to revive the Mother's Club.

Arctic Women in Crisis Center

The Arctic Women in Crisis Center has provided strong support to victims of domestic violence and currently plays an important role in educating Barrow residents about the cycle of domestic violence.

Public Radio Station

The local public radio station has been and continues to be an important educational tool for residents of Barrow and the surrounding communities. Specifically, the weekly program "To Your Health" discusses of health issues impacting the North Slope Borough. The radio program seeks and promotes educational campaign materials such as the "Just Say Whoa" teen pregnancy prevention campaign designed by the Alaska Department of Health and Social Services.

Opportunities

Schools and Youth

Focus group participants indicated they were very interested in working with the school district to increase the role the schools play in promoting comprehensive school based health education for all school age children. They supported mental health and teen pregnancy being included in of the curriculum. Teens stated they are very interested in educating peers about teen pregnancy, domestic violence, drugs and alcohol, and other difficult issues through personal testimony, peer counseling and development of a youth theater focused on these themes.

Youth Activities

Focus group participants supported having a viable teen center. They noted that current youth activities focus mainly on basketball and that many young people don't have sports as a primary interest or ability. They supported the addition of arts and crafts and other activities. They also supported opportunities to connect with elders in the community and suggested that kids adopt a grandparent at the senior center.

Parenting Skills

Many participants indicated feel that it is important to support young parents in the development of good parenting skills. They stated parents often feel isolated in their child rearing roles and welcome opportunities to connect with other parents and to have someone to consult with about parenting issues. The groups also stated it is important that the training and support be ongoing and provided by local residents.

Local Control

There was great concern expressed about the recent vote changing Barrow back to a "wet" community. Many wanted this issue revisited by the community in the future.

Cultural Values

Many participants identified the importance of preserving and strengthening cultural values. Focus group and community forum participants put forward the importance of village and regional corporations working together to increase cultural programs and activities in the schools. "Traditional and modern cultures go hand in hand," according to one participant.

Community Taboos

Many focus group participants supported the need to overcome the community taboos restricting open discussions of domestic violence, child abuse, sexual abuse, substance abuse, and gambling addictions. A number of participating survivors seemed ready to begin this process. A compelling need to develop locally based treatment programs for offenders was also identified.

Delta Junction

Delta Junction, with a population of less than 800, is located at the junction of the Richardson and Delta Highways, 100 miles southeast of Fairbanks. About 50% of all jobs in the area are directly related to the operation of Fort Greely, currently scheduled for realignment beginning July 1997, with total phase out by 2001. The phase-out has been a major concern to residents of the area, and is expected to cause substantial long-term disruption to the local economy. Agricultural activities, combined with the summer tourist industry, are other contributors to the local economy.

Community Concerns

Local Control

Participants stated that residents of Delta Junction are quite independent and tend to distrust State agencies. They expressed a desire for local control, and encouraged the de-professionalizing of healing efforts. They agreed that "intervening" help is needed occasionally, but stated they don't support it always must be provided by the State. When intervention is offered, participants strongly recommended that it be "low key" and non-threatening, and that parents be encouraged to seek help voluntarily.

Health and Social Services Availability

There was great concern expressed over the lack of available services for victims of domestic violence and troubled youth. They stated, some physical and mental health services are provided on an itinerant basis out of Fairbanks but significant unmet needs remain. One participant said "I don't know of a place in town where someone can go [if they are at risk for domestic violence]." Another said, "people can't turn to the law, they will just throw us in jail - we can't talk to the church, they will just send us to hell... ." In addition, most agree there are few resources in Delta for teens. Little support is available until problems escalate to the point that state troopers have to get involved.

Parenting Issues

Parents and other community members are very concerned about teens in Delta Junction. They note teenagers may not be mature enough to assume responsibilities for their own decisions and the law prohibits parents from intervening. Others argue that parents are occasionally punished for disciplining their children. There was also concern expressed that children defy parental authority and parents are held accountable, morally and financially, for the destruction of personal property by their children.

Participants believe that few tools exist for parents to manage children during times of crisis. Often, Delta Junction parents are not aware of problems, and then do not know who to turn to for help when they discover them. One said "you do the best you can for the children, but sometimes they fail, and then

sometimes you fail." Many noted that "runaway" laws are insufficient. Several participants noted that they were supported by DFYS intervention when their teens were having problems and that mandatory attendance at parenting classes had been helpful for them.

Juvenile Crime and Runaways

Both teen and adult members of the focus groups believe juvenile crime is a problem in Delta Junction. The most common crimes include shoplifting, drinking, and fighting (typically alcohol related). Teens said parents are seldom at home, and those parents who are at home are often abusive - both physically and verbally. Many feel it is better to run away than to stay in an abusive family situation. This begins the process of "becoming homeless." Kids from Delta Junction typically end up in youth facilities in Fairbanks or Anchorage. Parents feel that the detention centers do little to solve the problems youth are experiencing.

Youth Activities

Another problem frequently mentioned is the need for more activities for juveniles. Some think problems with teens are related to alcohol and drugs, but others feel it is due to too much juvenile freedom. One participant said, "when I was young, I worked for everything I got. In order to give my children a better life - I didn't require my kids to work for everything they got - they have it easier - I think that is wrong." Students at the alternative school felt excluded from the routine activities in the public high school, including dances, after school activities, and even getting on the school bus. They felt labeled, stereotyped and "loaded for failure." The exclusion is very hurtful and leads to more destructive behavior.

Fort Greely Issues

A strong sense of separation from residents at Fort Greely surfaced as a hindrance to improving health and social issues. Few parents attend parent effectiveness training at Ft. Greely due to poor hours, lack of advertising, bad time of the year, or lack of a "welcome" feeling. While Delta Junction teens are invited to use recreational facilities at Fort Greely, they too spoke about the feeling that they are "put into a lower class," because they are civilians.

Domestic Violence and Child Abuse

Focus group participants discussed the definition of domestic violence and child abuse at length. Some think the definition should be limited to physical abuse, but others think that mental and verbal abuse, and extreme family dysfunction should also be included. Most agree there needs to be a better understanding about these issues in Delta Junction.

Community Strengths

Support Groups/Churches

Support groups based on the twelve step approach are an important source of support in Delta. Some also believe the churches are major community assets.

Alternative School

Teens at the alternative school said their school is a great source of strength. One said, "it is more of a family than it is a school and that's the way it should be." They value the teachers' efforts in setting rules and limits, providing support, and promoting self-esteem. Teens urged parents to learn similar skills to be better parents. In addition, the natural helpers and peer support system were put forward as working well in Delta. Teens at the alternative school volunteered to work with professionals and parents in the design of strategies to effectively serve troubled teens.

Women in Crisis-Counseling and Assistance (WICCA)

Available services for domestic violence victims are valued, by some in the community, but not universally, according to participants. Participants also noted there are limited services in Delta; women need to travel 100 miles to Fairbanks for help. Some noted that male victims in domestic violence can not access services at all.

Division of Family and Youth Services (DFYS)

DFYS received mixed reviews. Some group participants said people are afraid of what the State will do to them if they report a domestic violence incident or suspected child abuse. Runaways often went to DFYS scared to return to their family, and DFYS provided voluntary referrals in response. Nonetheless, people stated they fear DFYS involvement and intervention in family disputes. Some group participants think DFYS should improve its image in Delta.

Opportunities

Local Control

Group participants expressed a strong desire to make changes happen at the local level. They urged the State to provide more funds for grass roots, community-based efforts. Those participating in the focus groups really appreciated the process. While health and social service organizations in Delta traditionally work independently, they felt that there is much to be gained by working collaboratively with others in the community.

Increase Community-based Services

Participants urged more resources be applied to human services in the Delta area. They said programs should emphasize prevention and early intervention. They also urge broader media campaigns (including PSAs, newspapers, posters, etc.), development of a safe house, hiring a community counselor, and enhanced collaboration of churches to provide some types of services.

Legal Issues

Amending State laws was mentioned as one of the principle ways to address health and social issues. Specifically, one participant urges a change in "runaway" and "family" laws which would make it more difficult to take families apart. Participants encouraged others to become more involved in strengthening laws that empower parents and hold juveniles accountable for their actions. Participants generally agreed solutions should not be unnecessarily "intrusive" and state intervention with a child removed from the family, should take place infrequently.

Teen Activities

Adult and juvenile participants expressed the need for more teen activities including arts, sports, scholastic activities and a teen center. Teens also expressed a desire to become more involved in community activities. One suggested helping senior citizens. She urged adults, "don't talk down to teens." The teens said providers should find different ways of seeking out and connecting with teens in need and allow them to become involved gradually. They urged teachers and fellow residents to "give us a chance, and view us as individuals."

Family Centered Activities

Participants urged parents to spend more time with their families. "Don't work so much - don't be workaholics - spend quality time with your family." Family-centered services and family activities were strongly supported/encouraged by all participants.

Emmonak

Emmonak, at the mouth of the Yukon River, is 175 miles northwest of Bethel. The population is estimated to be nearly 900 people but swells to 1000 or more during the fishing season. Most residents pursue a subsistence lifestyle and traditional activities. In the past decade, Emmonak has developed a commercial salmon fishing industry.

Community Concerns

Substance Abuse

Focus group/forum participants agreed that substance abuse is a significant problem in their community. It is associated with domestic violence, child abuse and neglect, injuries, fighting, suicide, and teen pregnancy. Many citizens in this dry community engage in bootlegging and making home brew. Alcohol is a problem year-round but is especially prevalent during the summer months and on weekends. There was concern expressed regarding drinking by juveniles. Children are often approached on the streets and invited to buy alcohol and substance abuse support groups are poorly attended, according to participants.

Teen Alienation

Teens expressed a strong sense of isolation from elders. Many believe elders and adults in Emmonak do not care about teenagers and said many adults allow their teens to get drunk and do drugs. Teens were concerned that adults spend too much time and money playing bingo. They said bingo reduces the time that parents spend with them and bingo losses mean families do not have money for the basic necessities of food, shelter and clothing.

Activities for Teens

Teens stated there is little for them to do. They wanted activities beyond the traditional fiddling contests, Eskimo dancing, and bingo. Teens were especially vocal in opposing bingo, arguing that it reduces the amount of time they can use available physical facilities. Teens were also concerned about substance abuse among their peers and noted that people who get drunk "make fools of themselves, and their reputations are ruined." Teens agreed it is very important for them to be good models for younger kids.

Domestic Violence and the "Code of Silence"

The group defined domestic violence in very broad terms. They included abuse between boyfriends and girlfriends, and between children and parents. One participant noted that domestic violence began to increase dramatically in the 1950's, 60's, and 70's. They believe it is unlikely the problem will be solved "overnight." "We know it happens here, people try to ignore it, and it is hidden," stated one participant.

Village public safety officers, domestic violence shelter staff and others stated they feel overwhelmed by the task of dealing with violence and abuse. Community residents turn to these providers to fix many of the problems in the community. As a result, the providers noted that they get burned out and need to "get away" from their village responsibilities periodically in order to continue their work. They noted they are aware they cannot fix anyone, that solutions reside within the affected individuals, and they can only support each individual's efforts to help himself or herself.

Child Abuse and Neglect

Group participants said they are very concerned about the health and safety of many children in the community. They believe that many parents do not have the skills to be good parents. One person said, "parents often talk roughly to their children." In defining child abuse, group participants included verbal abuse and neglect, as well as physical abuse. Most agreed that much child abuse is alcohol related. Focus group/forum participants noted that while they often see parents of young children treating their children poorly, they perceive it is difficult to step in and provide guidance. There appear to be community norms against this. It was stated by several that when the abuse gets bad enough, the authorities are called in to deal with the situation. Some expressed concern about unmarried couples living together in Emmonak. They stated they believe these couples generally abuse alcohol and drugs and that when babies are born, the men often do not stick around to help raise the children.

Community Strengths

Women's Shelter

The Emmonak Women's Shelter was frequently cited as a very positive force in the community. Their efforts to educate the community about domestic violence were especially appreciated. One focus group participant recalled a conference that was held in Emmonak with outside speakers. She said, "We seem to be doing more than our speakers are doing".

Collaborative Efforts

Staff from the Women's Shelter, a RurAL CAP grant project, the Emmonak Project Fund, and the Suicide Prevention Program have worked closely together on projects designed to address the issue of domestic violence, substance abuse and other difficult issues. This was viewed very positively by community members.

Elders

Many participants stated the elders are considered a major source of community strength in Emmonak. Group participants encouraged parents to learn more from elders about child rearing and potential child abuse, thus potentially reducing the problem. Many teens expressed a desire to become more closely connected with the village elders.

Community Support

A major strength in Emmonak put forward by the groups was the community itself. Group participants said Emmonak is a "family" style town where people care about one another. They said Emmonak has many people who are helping one another keep sober through AA and other sobriety efforts; are volunteering to teach survival skills; and are working hard to have good sports teams. One participant said, "The answer needs to come from those of us in the villages, not from someone in Minnesota." Another said, "If we are going to get anywhere, its going to be through our own people."

Other Strengths

Group participants stated they believe the BIA Social Worker is a major asset to the community for combating child abuse. The teen youth program was also noted as a major community strength. The program allows teens to meet and support one another. Also applauded were the public safety officers for their dedication to the community.

Opportunities

Activities for Teens

Teens and adults expressed the need for a teen center and more activities for kids. Teens want a strong adult to monitor activities and enforce rules. They also want the building to be small so that "it looks full and crowded." They suggested the center include arcade games, a weight room, a TV, snack place, and areas for activities like dances and on-going discussions with elders. They want more than just teens to be able to use the Center and suggest an out-of-town location so that center noise will not disturb others. Some teens also want to spend time in hunting and gathering.

Local Support/Treatment Programs

Group participants recommended having community-based support groups/ treatment programs for substance abuse and other social issues. The group supported treatment options conducted in traditional style. They suggested there are qualified councilors in the community who have earned their "degrees" at the school of experience who stand ready to serve. They want treatment to involve the entire family, not just the abuser.

Elder Interaction

Most participants want elders to be included more in community activities. Said one, "They have so much knowledge, but our elders are not speaking out." Teens want to connect with elders and seek advice and support from them. Teens expressed appreciation for the remarks of one elder posted on the school bulletin board. Teens said some adults and elders think all kids are bad and disrespectful and that increased interaction might help resolve this misunderstanding.

Parent Effectiveness Training

Parent effectiveness training was frequently mentioned as a method for reducing child abuse. One participant said, "we don't want our kids to grow up in abusive environments - people should be good to each other." Participants strongly recommended increased conversations with the elders and the formation of parent groups for sharing information about child rearing and potential child abuse. Parents need to be educated about the harmful effects of "rough talk" and shaking their kids. Many people who would benefit from parent effectiveness training do not attend classes; perhaps home visiting would be more effective, according to participants.

Employment Needs

Many stated they believe more employment opportunities are needed in the community. They believe keeping everyone busy will reduce stress and leave less time for activities that eventually led to domestic violence and other problems. Participants want locals to have preference for the jobs that are available/created.

Health and Social Services Training

Focus groups strongly recommended that local residents be trained to better address health and social issues. They strongly recommended the "train-the-trainer" approach in which teams of providers (volunteers, Community Health Aides, Indian Child Welfare Workers, Village Police Safety Officers and others) would get the same training. The group could then return to the village and organize training for the whole village. They like the idea of the training being done in regional hubs with local perspective.

Problem Identification/Solving

Group participants said there needs to be more open discussion about domestic violence, child abuse and substance abuse and other such problems. They agree the highly charged emotional nature of these situations makes it very difficult, but they think people need to know how to ask for help.

Homer

Homer is a first class city of about 4,400 people 230 miles south of Anchorage. It is a predominantly non-Native community with less than 4% of its population Alaska Native. Although commercial and sport fishing are the center of economic activity, Homer has a large community of artists, and enjoys a considerable seasonal tourist industry. There is a wide array of health and human services available, including an acute care hospital, long term care services, and ambulatory services for physical and behavioral health care.

Community Concerns

Substance Abuse

Participants in the focus group strongly agreed that substance abuse is a serious problem in their community. One participant said, "if everybody is drinking all the time, I'd say it's a problem." Another participant noted that "There has always been lots of pot smoking in Homer." Someone else said, "I can't remember a gathering, either personally or professionally, where alcohol wasn't served - it's like going back into the "60's." Participants noted there are few community activities in which alcohol is not served.

Teen Substance Abuse

Teens and adults believe that most teenagers use alcohol and/or drugs and that substance abuse leads to other problems. One teen said that she "had never been in a place where so many people did so many drugs all the time." Teens said it is easy to obtain alcohol in Homer. According to one, "You can find a party any night of the week." They said drug abuse is also a problem, and marijuana is the drug of choice. One teen stated, "You can see it all over school, the way they look." Another said, "A lot of people get high before coming to school in the morning and smoke pot on breaks. It's just the way it is." There is concern that the teen substance abuse treatment services available in Homer are inadequate.

Teen Pregnancy

Many teen participants stated they believe teenage pregnancy is a problem in Homer. They reported that classmates and friends have already dropped out of school because of pregnancy. One teen said that girls in Homer get pregnant and give their children up for adoption. Some participants said teenage pregnancy is not a problem. They said that dealing with teenage sexuality, pregnancy, and substance abuse are all related to individual choice. "Some girls are taking good care of themselves and their baby - they are not having any problems," according to one participant.

Self-esteem was cited as an issue for teens who become pregnant. It was put forward that young women want a guy that they can love and trust. One said, "She'll do anything to have someone to love her and hold her." Teens stated they

believe young women often think they can find this love from their baby. They were quoted as saying, "Girls who have babies say, 'this is mine! I can love this baby.'" Another participant pointed out the connection between girls that were sexually abused as young children and subsequent pregnancy during the teen years.

Teens and Birth Control

Many teenagers said it is difficult to obtain birth control in Homer. Condoms are available in some businesses, but others have removed them due to adverse publicity and public pressure. It was stated, although condoms are free of charge in one store, many teens go to another store where condoms are not free and steal them. One teenager said condoms are easy to get, but guys just don't want to use them, and are embarrassed to purchase them. Teens stated abortion is not a decision to be made lightly and that keeping the baby is a very hard decision because many teenage moms still want to complete high school.

Health Education in the Schools

Participants noted that school involvement in health education in Homer is weak. Adults say the school is not aggressive enough in substance abuse education, and teenagers expressed dissatisfaction with the high school sexuality curriculum. Some believe health education in the high school cannot be improved in its current environment. Students noted that "Some of the videos used in school are disgusting and old," and that the same videos are shown year after year. Students stated they appreciate education classes provided by public health nurses. Some teens said that addressing substance abuse and teen pregnancy are not great priorities for either teens or the community.

Juvenile Crime

Teens reported that juvenile crime is a problem in Homer, particularly theft crimes, such as shoplifting, breaking and entering, and stealing car stereos. Participants offered that shoplifting is not prosecuted aggressively on the peninsula. Some said that shoplifters have to pay for what is stolen plus an additional $200 fine.

Activities for Teens

There was some discussion about the "lack of something to do in this town," suggesting that teens need places to go and things to do. In addition, it was put forward, teens from the alternative (flex) school that have alcohol or other problems often feel ostracized from high school activities. They said they are often shut out of activities such as basketball, clubs, and other extracurricular activities. Teens confirmed that "If there is just one person who cares, it makes all the difference." Some in the group said those kinds of people are in short supply in Homer.

Community strengths

"Clean and Sober" Supports

Participants reported a well developed schedule of AA meetings in Homer and Anchor Point. Narcotics Anonymous also meets several times a week; participants identified as problematic the lack of Al-Anon or Al-Ateen programs. The Homer School district has a drug and alcohol awareness program as part of its curriculum, and the flex school sponsored a "clean and sober" group last year which was successful.

Teen Pregnancy Prevention/Intervention

Group participants said more is being done to address the issue of teen pregnancy in Homer now than was done three or four years ago. The teen group participants noted that the community has made efforts, including some sex education in the Homer hospital, and in the high school classrooms. One teen said the "baby-think it over" program is a good way to make teens aware of the requirements of tending to a baby. The program uses a small computer embedded in a doll that cries periodically to remind the teen to take care of it. The Crisis Pregnancy Center was also noted as being available for counseling pregnant teens.

Opportunities

Alcohol-Free Activities

Group participants identified the need for more activities in Homer where alcohol is not served and sobriety is encouraged. One participant praised a museum's decision to avoid serving alcohol during the annual gallery tour. Teens also urged the development of non-alcohol related fun activities, such as more parties with "good loud music." They suggested constructing a Teen Center with roller skating, racket ball, and other indoor and outdoor activities. They advised there be strict rules and no tolerance for alcohol/drug use at the center.

Group participants urged improving the alcohol prevention curriculum. They believe schools have the potential to provide a strong role in prevention, but are not meeting their expectations. Teens said drug and alcohol education doesn't sink in—there are too many facts provided: "We don't learn much out of books," said one student. The teens requested a stronger, more peer oriented program. One said, "We need to have learning happen when the emotions are engaged." Participants agreed a variety of educational methods are needed to get messages across. They requested education begin at an early age, well before the seventh grade.

Teen Pregnancy Prevention

There was general agreement there should be a comprehensive education program on teenage pregnancy for both teens and parents, and that this curriculum should be used in earlier grades. Teens want to preview materials and, if possible, become part of the presentation. They suggested having teens who have had babies return to school to share their experiences with others. Teens suggested increasing the availability of implants and depo-provera shots for birth control. They also urged more classes on sexually transmitted diseases. Finally, other suggestions included building the self esteem of teens, teaching refusal and decision-making skills, education on the importance of valuing women, and enhancing sexuality education for the men.

Much discussion focused on getting parents involved in educating their children. Teenage participants agreed that teaching parents how to teach their children is a difficult task, particularly with sex education. One said, "Parents can't deal with this!" The group said sex education beginning in early adolescence may be too late. One teen said, "My mom was frank with me when I was young (12 years old) - I knew a lot more than my friends did." Others urged enhanced media involvement through a "family sexuality month."

Juvenile Crime Prevention

In terms of dealing with juvenile crime, one teen recommended people start locking their homes and cars. Teens also suggested the State take a serious look at television programs and movies that show youths how to commit crimes.

Open Circle Activities

The "Open Circle" was a community group that formed several years ago to work on resolving health and human service issues. While the group lost focus and has not met consistently recently, there appeared to be interest in reviving the group.

Mat-Su Valley

The Matanuska-Susitna Borough is one of the most diverse areas in the state. It includes large population centers in Palmer and Wasilla, as well as more rural areas such as Chickaloon and Sutton. The population of the Borough is growing rapidly - from 17,500 people in 1989 to over 50,000 people in 1995. Most health and human service providers believe their staff has not grown in proportion to the rapid population growth.

Community Concerns

Lack of Public Transportation

Participants stated the lack of public transportation creates barriers to services throughout the borough. As a result, residents of the Mat-Su Borough need to have a car that runs in the winter and this frequently makes people ineligible for welfare payments (AFDC and Medicaid). Home delivery of services is not believed to be financially viable.

Conservative School District

Many stated the school district should be a major player in terms of addressing health issues but they believe the district is too conservative to take on that role. For example, the school made the decision to buy computers instead of teaching children about child abuse, according to one participant. Another said, "I think it's the parents that are conservative."

Homelessness

Although an emergency women's shelter is available in the Borough, it is not adequate to meet the demand for services since the number of homeless women continues to increase. As many as 25 calls per month are recorded at the existing shelter. One provider said, "We can't help them all, or if we do, we can only help them once."

High Incidence of Violence

Most participants had personal knowledge of violent episodes. The groups presented statistics on violence in the Borough, reporting that the per capita incidence of violence in Alaska is four times the national average, and in the Mat-Su Borough four times the state average. Participants said a growing number of teenagers come from dysfunctional families where violence is common. One said the teenage runaway shelter is providing services to a class of kids who "have burned their bridges behind them in home and in school, and who gravitate toward crime and gangs."

Substance Abuse

All group participants agreed substance abuse is a significant problem in the Borough. One said, "It is the most important thing we have to address - it is a public health, safety and financial problem." They reported at least 80% of all people in prison are there because of an alcohol-related crime, and 48% of all kids in juvenile correction facilities have had drug problems. They also reported, DWI arrests are at record high levels and the Alcohol Safety Action Program (ASAP) has approximately 100 intakes per month. Many participants expressed concern regarding the public health hazards of drinking and driving. Nearby communities have established different closure times for bars. When the bars close in Anchorage, folks who have been drinking often head for the Valley to continue drinking, placing themselves and others at risk.

Physical Health Access

All group participants agreed that accessing services for physical health is a significant problem in the Mat-Su Borough. Many reported the lack of children's services, reproductive services, school-based clinics, mobile clinics, and alcohol rehabilitation services. Problems were noted to be especially severe in the more rural parts of the Borough, such as Talkeetna, where the clinics often see cases more appropriate for larger, more sophisticated clinics. Participants listed the following obstacles to accessing services: unemployment and lack of cash; uninsured or underinsured people in the Valley; the lack of transportation; use of medical care during times of crisis rather than preventive treatment. In addition, they discussed how Anchorage often counts the Mat-Su Valley as a service area in applying for grants, but seldom actually serves the Valley when grant funds are received.

Community Strengths

Many Human Service Programs

Many Health and Human Service programs and facilities exist throughout the Borough. Group participants listed the Mat-Su Children's Services Task Force as a major strength for enhancing coordination among programs. Other strong programs cited included the PATCH needs assessment, the application for a Healthy Families grant, an emergency food bank, the United Way's transportation study, the sexuality education in the public schools, and numerous volunteer groups. Group participants reported a growing involvement in community issues by the Valley Hospital.

Successful Substance Abuse Efforts

Group participants listed many efforts which are in place addressing substance abuse. These included: Kids are People; Red Ribbon Week; the Turn Around program; Drug Free schools; Alcoholics Anonymous; ASAP; DMV laws in which multiple DWI offenders needed to show successful completion of treatment (this

has not enforced by DMV); police in the schools that referred kids to treatment programs; and a closed campus at the high school so that kids can't leave the school grounds during the day.

Opportunities

Consistent Voice

Some participants believe that health and human service providers in the Borough are not speaking with one voice. One participant said, "It took us three years to get a memorandum of agreement for Head Start Programs with the School District." The group believes providers must band together and form a coalition. However, they agree efforts might be impeded by the fear of retribution by funding agencies. They strongly recommended developing a centralized facility to access needed services.

Juvenile Violence Efforts

Group participants offered many suggestions for addressing juvenile violence. These included: anger management education in the schools; shelters for runaway teens; an inter-agency referral system where clients participate in their treatment plans; a multi-faceted youth facility, including youth courts; a diversion program for kids; the Mat-Su Alternative School; the "kids are people too" program; and having zero tolerance for violence in the schools.

Collaborative Services

Participants support efforts to help reduce fragmentation of services and duplication of effort. They suggested the Matanuska Borough government or the Mat-Su Children's Services Task Force as a forum for discussion on child services and development of a unified approach to services. Many suggested consolidating the transportation system to reduce insurance costs to individual agencies, improve vehicle maintenance and expand transportation options. The development of a borough-wide information and referral system was put forward as a possible very useful tool.

Resource Utilization

Many said they believe the women's shelter and the food bank need additional resources and to coordinate use of existing resources. Some said churches (including the Salvation Army) should also increase their visibility and contribute more to the health and human service delivery system.

Schools

Group participants said they believe the schools are a potential community asset for providing needed services and educating teenagers about social issues.

Parent Empowerment

The group identified the need for working with parents to help them to develop the skills needed for raising children. They believe this effort needs to start when the children are very young; since waiting to provide parenting support until the children are adolescents has not been a successful strategy.

After-School Activities

Most group participants supported developing diversion programs and more after-school activities for teens. They agreed that a decrease in activities for juveniles will lead to increased crime and violence in the Borough.

Prevention Efforts

Group participants noted the Borough needs to focus more attention on prevention efforts. People tend to seek emergency care rather than preventive care. They said they are aware dealing with crisis situations is a poor approach to resolving problems such as violence, but many believe there is not sufficient staff to do much else. Many support prevention oriented programs such as teacher training. One participant said, "We have fire drills, but we don't have plans for dealing with violent situations in the schools."

Alcohol Abuse

Group participants suggested addressing public policy by holding bar owners responsible for serving intoxicated people. They also suggested holding drunk drivers more responsible for their actions by increasing the cost of the first DWI offense and making penalties for that offense higher. Participants strongly stated they believe bar hours should be reduced, and barkeepers should be penalized for serving drunk people. Participants also suggested addressing alcohol abuse by having an alcohol treatment center in the Wasilla area. One said, "We can't keep sending people away for treatment." They suggested inpatient services and residential treatment connected with intensive outpatient services and aftercare.

Church Involvement

Group participants expressed a general sentiment that churches should become more involved in helping resolve health and human service issues in the community.

Metlakatla

Metlakatla is a traditional Tsimshian community. The community was not part of ANSCA, but has maintained the 86,000 acre island reservation and the surrounding 3,000 feet of coastal waters under local control, not subject to state jurisdiction. The community regulates commercial fishing in local waters and operates its own tribal court system.

Community Concerns

Substance Abuse

Group participants noted substance abuse is a problem in Metlakatla. Although Metlakatla is by law a "dry" community, and "eviction powers" are occasionally invoked, violations of the alcohol prohibition ordinance were stated as common. Participants noted "community denial" of substance abuse and apathy. It was put forward that many believe "Recovery doesn't work anyway, so why try?"

Most teen participants said they have experienced intense pressure to become involved in alcohol, drugs, or violence. They reported that over the years, alcohol and drug abuse have taken the lives of many young teens in Metlakatla. Teens reported violence as a major problem, and said they believe much of it is alcohol related and modeled after events they see on television. They noted that drugs and alcohol take much of the initiative for pursuing dreams away from teens. A division has grown between "gangs" and those teens who chose not to engage in violence or drugs. Teens practicing sobriety expressed the need to become better role models for middle school students.

Frustration/Isolation

Although teens in Metlakatla face problems similar to teenagers everywhere, they believe many of these problems are compounded by the environment in which they live. One teen described feelings of helplessness through the comment, "I have bigger dreams than this island." Other teens related feelings of discrimination against Indian people, and their desire to distance themselves from teenagers who lack discipline and are disrespectful of elders.

Teen Pregnancy

The group stated the number of teenage pregnancies seems to fluctuate from year to year. One teen said, "Losing your virginity is like drinking a pop, it's no big deal." Many teens believe men in Metlakatla are taught to "use" women, and not to respect them. The teens reported that younger kids are now having sex—in fourth grade or even younger.

Child Abuse Common

Most group participants reported personal experience with child abuse, and report that it occurs in families from every school, church, and even with town leadership. They noted that child abuse is "passed" from generation to generation, and that many abused children were "not wanted in the first place." Participants said despite this community awareness of child abuse, the issue receives little public discussion, contributing to a "code of silence." Service providers were reported to be reluctant to share information because of patient confidentiality and some participants believe there is significant under reporting of child abuse. Group participants see human service provider case loads as overwhelming and thus they are limited in their ability to respond appropriately to reports of abuse and neglect. Participants believe many people who are abusers, or are at risk for abuse, choose not to come in for services.

Domestic Violence

Most participants in the focus group also reported personal experience with domestic violence. Most agreed alcohol contributes to domestic violence, and serves to exacerbate an existing problem. Participants believe the community is in denial and acts surprised when domestic violence happens. They also observed that domestic violence is not taken seriously. One participant reported an incident where the police department was called about an abusive situation and put the abused party in jail instead of the perpetrator. It was stated people who really want help do not feel comfortable turning to DFYS, the State, nor the police. They also noted there are a lack of services related to domestic violence. "It is difficult to find somebody who will hide you - if people find out the hiding place, they will hunt you," according to one individual.

Church Non-Involvement in Social Issues.

Group participants said churches are not active in helping reduce problems such as child abuse. They feel churches reinforce the "they are not worthy" idea which erodes the self-esteem of people in Metlakatla. Some reported competition among the churches and clans, and the pitting of kids against one another.

Community Strengths

Life Savers Program

The Life Savers Program which meets in the Metlakatla Teen Center is highly regarded. The Life Savers Program addresses child abuse, substance abuse and promotes self-esteem in young people. The program actively promotes sobriety and has demonstrated success in this area. One teen noted, "When I first came here, I asked what kids do in Metlakatla - I was told party, sex, and drugs. Now that I have joined this group, I keep busy and don't do drugs." The teens in this group reported they decorated Christmas trees for elders, visited seniors at the Senior Center, and have provided on-going support groups. Future plans include: opening a snack bar, bringing in more games, and offering movies in the teen center.

Strong Sense of Community

Many participants believe local Indian people are "stepping out" and taking more responsibility for local conditions. Participants identified many committed individuals and programs in Metlakatla that can provide a strong base for expansion and coordination of programs. One participant said, "As this town gets more educated, they will react to the community needs - we have a strong cultural base - this should be the basis for locally developed solutions to local problems." In addition, many identified Metlakatla families and elders as a dominant strength in the community, and that people always help one another in times of crisis. Participants agreed the community needs to address problems on its own, without help from outside agencies. One participant urged Metlakatla residents to "stop blaming the white man, and accept responsibility for resolving local problems."

Committed Service Providers

Participants identified a growing strength in the school system. They talked about having a new principal who is very interested in helping solve community problems. They also believe their service providers, including the counselor in the Elementary school, are very committed to helping solve problems.

Opportunities

Teen Activities

Many stated the community has not done much to provide opportunities for teenagers. They said projects are often started and then discontinued. Participants suggested providing more healthy, alcohol-free activities, strengthening the teen center, expanding the Life Saver group to include younger kids, and helping provide more jobs for teens.

Health Education

Most participants agreed the schools need to provide comprehensive health education at an early age (elementary school or middle school) and include a focus on self-esteem, substance abuse and child abuse and neglect. Some also recommended the schools provide emotional help for students who have or are suffering from child abuse. One participant said, "If kids are worried about family matters, they won't be ready to learn - schools should support these efforts, but often do not."

Parental Involvement

Group participants suggested increasing parental involvement in efforts to combat child abuse. One participant urged parents to focus on kids - not on bingo. Most agreed a stronger team approach is needed, with a long term commitment to resolving problems.

Public Awareness/Services

Many recommended more televised public service announcements about domestic violence and substance abuse, especially during high risk periods of the year, such as holidays. One participant noted, "We must stop the secret - we must start talking about the problem." Participants also noted the need for increased services including a safe house for victims, domestic violence counseling, after care, and educational services for men and families.

Training Needs

Many strongly agreed that training local providers is essential for addressing problems such as domestic violence. Participants are convinced local providers can be trained to deal with issues far more effectively than outside providers.

Prevention

Most participants supported more attention being directed to prevention and early intervention activities. One participant said the health and medical care reimbursement system is geared toward inpatient reimbursement, and not prevention.

Substance Abuse

Group participants said it is very important to address substance abuse in the community. One said, "We are sick as a community, to a certain degree, but we are certainly not all dysfunctional." In order for changes to be made, many believe that community denial must be addressed. One participant said, "The public has to take a stand and demand that something be done."

Many said the Tribal Council should develop a substance abuse plan and a resolution supporting substance abuse interdiction and control. Participants feel it is important to find ways to increase community awareness and resolve to deal with the problem. In addition, participants recommended training the community on substance abuse, increasing resources and support for long term family substance abuse treatment, and increasing staffing for Metlakatla human service programs.

Mountain View

The focus group effort was sponsored by the Mountain View Task Force, an affiliation of community leaders who have banded together to help resolve the problems in Mt. View. After the agreement, but before focus groups could be scheduled, several violent incidents led the community into a major internal problem solving effort. Thus, only one focus group was held in the community in order to not intrude on the ongoing community work.

Community Concerns

Lack of Medical Services

Focus group participants noted that there are insufficient preventive medical, mental health, and dental services available in the area.

Juvenile Crime

Most focus group participants agreed that juvenile crime is a serious problem in the area, and most know of a teen who is having trouble. The lack of activities for teens is thought to be a significant factor. As one said, "If there's nothing to do, then being bad is fun!" The group stated it appears juvenile crime increases one's status in Mountain View. As one reports, "People are proud of you if you get into a fight."

Opportunities

Medical and Mental Health Services

The group stated they believe the long term objective should be to develop a holistic medical center, including physical health, public health intervention, dental health intervention, mental health, and preventive services. The group's short-term recommendation was to identify an interim site for services. Physician services are currently being provided through church groups, the Anchorage Neighborhood Health Center, and the Southcentral Foundation. They stated that perhaps public health nursing could be provided through the Municipality of Anchorage.

Juvenile Crime

The group talked about the need to develop arts and activities programs in which the teens themselves can be involved in the development.

Selawik

Selawik is a town of 650 people, located at the mouth of the Selawik River, about 70 miles southeast of Kotzebue. It is an Inupiat Eskimo community active in traditional subsistence activities. The sale or importation of alcohol is banned in the village, although bootlegging and the use of non-beverage alcohol substitutes (hair spray) are common.

Community Concerns

Child Abuse

Participants agreed that child abuse is a problem, although some believe it has improved this year (1995) over previous years. Most linked child abuse and neglect issues to alcohol abuse, but acknowledged some people who don't drink abuse kids, too.

Alcohol Abuse

Alcohol abuse was identified as the most significant problem facing the community, and a major contributor to child abuse and domestic violence. One participant said, "Kids have no clothes because of alcohol - we have no home or transportation because of alcohol - people get in trouble because of alcohol - we have teen pregnancy because of alcohol." Many believe the regional treatment programs in Kotzebue are not effective. Teens also said drug and alcohol abuse are principle problems among teens in Selawik. They said there is lots of bootlegging and home-brew, and many teens feel pressured to drink. Teen participants said the "bad kids" went to the Kotzebue group home, but had the same problems when they returned. Some believe these kids got worse while they were away. Teens reported smoking is common among kids - even in younger children.

High School Drop-out Rate

The group discussed at length the high percentage of school drop outs. Some think the policy of giving a failing grade to students with 16 or more absences discourages continuation of school. In addition, when the new principal arrived, he stated he found the students were in control of the school, and often abused teachers.

Housing Shortage and Lack of Water

Many agreed the basic needs are not being adequately met, particularly in the area of housing, sewer, and water. One said, "Twelve to thirteen people may live in a small home - today its better, but we still need housing." Sewer and water services are also needed. Only larger public facilities have these services, the remainder of the town hauls water and uses honey buckets. A year-round washeteria is provided, with some central water sources available only during the

summer. When the water is turned off in the winter, increased unsafe health situations emerge. There have been efforts to address these problems, however, they have been largely futile. One participant said, "They spend money on useless things, like 100 expensive toilets to be put into our homes - they were never used - it seems to me that they just bring their junk to Selawik."

Local Counseling Services

Many said the itinerant counseling services provided by Kotzebue are insufficient because they are only there one to two days a week - from 11:00 a.m. to around 4:30 p.m. The group supported counseling services based in the community. "Some of the suicides could have been prevented." Adults expressed preference for local counselors while teens think a trained "out of town" professional would be better than a local person. Confidentiality is a big issue for teens. Also, teens said counseling services provided by the teachers are inadequate. According to one teen, "All the teachers are guys." They urged counselors be closer to their age.

Lack of Basic Health Care

Basic health care is a problem for Selawik residents. Of particular concern is the need for dental services. Dental care is largely limited to emergency care. One participant said, "It's like saying you're not good enough to get your teeth fixed." Also, the group said the clinic building is too small.

Grant Writing Needs

A representative from the city administration said there needs to be more attention to developing grant writing capacity at the community level. He said funding is competitive and "we need to write a good grant - maybe we are not good grant writers." He said that getting some assistance writing grants might help solve some of the basic needs by increasing the amount of money coming into Selawik.

Distrust of Bureaucrats

There is a sense of frustration with regard to the perceived unfulfilled promises that politicians and bureaucrats have made. One participant said, "We always tell bureaucrats what we need, but they go back home and forget about us."

Vandalism

Teens reported that vandalism is a major problem in Selawik, and said it is considered "entertainment." Sometimes vandalism acts are simply retribution against others. Teens seldom get caught and when they do, they are rarely punished.

Teen Pregnancy

Teenagers were very reluctant to discuss the problem of teen pregnancy, but acknowledged that the problem exists. Participants believe teen pregnancy contributes to the drop-out rate in the school, and that most of the teens who

drop out do not know how to take care of their babies. Teens noted the health education curriculum materials need to be updated.

Recreational Opportunities for Teens

Many teens complained of being bored. One said, "There is nothing to do, so you just go out and find something." Teens said that most activities are for people who like sports, and there is little for teens who do not excel in sports. Teens urged reopening the multipurpose building.

Self-Reliance Concerns

Participants are concerned that young people seem to be ill-prepared for living in rural Alaska. Young families have become very dependent on a cash economy and thus have no patience and skills for using local resources. Everything is "automatic." One participant stated, "This is the instant generation - with store bought food, microwaves, fast snow machines, and no need to prepare for winter." Participants believe it is difficult for elders to communicate with "instant" children and grandchildren because they have no time to listen. Participants also said few community members or providers visit homes, thus there is a breakdown of traditional support systems.

Community Strengths

The "Younger Generation" Program

The "Younger Generation" program, supported in part by the Community Friends Church, is a strong positive force in the community. The Younger Generation started with one individual choosing sobriety as a way of life. Soon that person's spouse joined her in sobriety and the movement grew to a group of more than 20 members. The group meets several nights a week for gospel singing and fellowship. They seek out those who are most in need and welcome them to their group. Members, strongly committed to sobriety proclaimed, "We were the worst of the worst." The group has demonstrated substantial leadership in addressing social problems and some members have been elected to local leadership positions. They are also beginning to work with other community leaders to address problems of child abuse and neglect, domestic violence, and substance abuse. They also came together to provide an aftercare program for one of the member's teens who had completed a substance abuse treatment.

Community Ties

Group participants see Selawik as a supportive, close-knit community, despite its reputation as a tough town. One participant said, "Most people were born here - people are nice, and there is kinship and support." Another said people try to check up on one another, and help. They provide food, fuel and even cash to their fellow villagers in-need. The group noted that Selawik has a strong tribal government and elders group, coordinated community leadership, and an abundance of basic resources, such as caribou and fish. One participant said, "I belong here."

Opportunities

"Code of Silence"

Focus group participants believe it is important to break the code of silence around child abuse and neglect, child sexual abuse, substance abuse and domestic violence. Participants suggested open discussions about these issues at community meetings, and suggested wide spread education initiatives on these topics for local television, through videos and pamphlets at places used by the public (washeteria). They suggested that all age groups need to be involved in the discussions. Young children need to be provided refusal skills at a very early and the community needs to implement a "no tolerance" policy for abuse and neglect.

Tribal Court

Group participants believe the people of Selawik can address justice problems through tribal courts at the village level, particularly problems such as juvenile discipline. They suggested modeling a tribal court on a 638 contract. They said, judges support this effort of local control, believing it potentially more effective, and that it will lighten their caseloads. Selawik applied for funding for such a program some time ago, but was not awarded the grant.

Community Empowerment

Group participants agreed the community should be empowered to assume more responsibility for local health and social services. They strongly recommended that state officials "learn our ways" and visit villages more often to get to know the communities, thus increasing the trust level. Participants expressed a need for more help from the Maniilaq Corporation. "Our Corporation does not give a hoot about its shareholders," said one. They also suggested more technical assistance and training of local people in the conduct and administration of local programs. They affirmed the need for a local magistrate (reported to be promised, but not yet forthcoming). Participants strongly support local hire, and want more Selawik residents involved in the schools, counseling services, stores, and other jobs.

Activities for Teens

Teen group members suggested ways to increase activities for teenagers. They discussed providing more jobs that will give teens experience and enhance their self-esteem. Possible jobs include: cashiers, stockers, restaurant employees, delivery people, and working for elders in chore services. Although the multipurpose center and the recreational center have both been closed, they could possibly be reopened if volunteer labor is available (according to the Mayor).

Teen Pregnancy

Teens suggested many ways to reduce teenage pregnancy. They recommended abstinence and birth control (either pills or shots). Some believe teens need to be a certain age to get condoms, and others suggested a vending machine at the school. Although birth control is free at the clinic, they say clinic services are not private and "everyone will know." Teens encouraged more open discussions about raising children including financial costs and more exercises like the "flour sack" or "egg", where teens monitor these objects for extended periods of time. Teens would like elders to talk more about their experiences in child rearing. They also said that teens who had become pregnant should come back and discuss their experiences with their peers.

Student Support

Teens noted the lack of motivation at school. They said when they are not pushed, they find school boring. One urged more positive reinforcement. "They should make you feel smart when you do something right, and not make you feel stupid when you do something wrong." They also want more support from their parents. Self-confidence and self-esteem were discussed at length. One teen said, "If you don't like yourself, people won't like you. If people put down someone long enough, others will believe it." Teens said people should try to make a person feel more comfortable, like they are worth something.

Unalaska/Dutch Harbor

Unalaska/Dutch Harbor, 800 miles west of Anchorage is the largest community on the Aleutian Chain. The community's economy is based on commercial fishing, fish processing, and fleet services, such as fuel, repairs and maintenance, trade and transportation. Although Unalaska is a traditional Aleut settlement, currently, less than ten percent of the community is Alaska Native. The median household income is quite high - at about $56,000 per household.

Community Concerns

Housing Shortage

The year-round population of Dutch Harbor/Unalaska went from under 200 in 1970 to 4,300 in 1994 and now swells to 12,000 during peak seafood processing times. This has caused a severe housing shortage. More housing is now being built for the Native population, but many believe this will not help because elders from neighboring villages continue to arrive, keeping the demand high.

Lack of Activities for Teens

Teen group participants said they have little to do in Unalaska. They said they really need activities other than sports. Teens report only five clubs in the school, and that two of those are hard to get into.

Substance Abuse

Group participants said substance abuse affects all their lives, especially the lives of young and middle aged families. "This year (1995) is pretty bad," one reported. However, many believe alcohol abuse has always been a problem in Unalaska, among both Natives and non-Natives, and among locals and out-of-town fishermen. Currently the focus is on FAS/FAE kids who have severe behavior problems.

Lack of Parental Supervision of Children

The "workaholic" nature of the town and the lack of parental supervision was frequently mentioned in groups. Several said many single-parents came to Unalaska from outside and often work 40-60 hours per week, with little time for their kids. They also said preschool and daycare services are weak in Unalaska and need to be improved. Group participants noted that many parents seem to lack the parenting skills they need. A Parks, Culture, and Recreation Center Program, which provides parent effectiveness training and child care in the evenings, is usually poorly attended.

Teen Drug Use

Teen group participants reported some illegal drug use, particularly marijuana and alcohol. One student said, "There is not as big a problem with hard drugs now as it was a few years ago." Teens also noted that it is "not hard for a teenager

to find drugs here - they are not hard to get." It was also noted that there is significant cocaine use by adults. Teens reported a lot of students in the Unalaska High School smoke. The group state that even the "little kids" (5th graders and up) are smoking.

One student reported the core of the school student leadership is not involved in drugs, alcohol, or smoking. It is believed the upper classmen are often seen as role models to the junior high students. One student said that he feels as if everything is going "OK" and that the senior class is an effective role model for underclassmen. But another student strongly disagreed, stating that half of the kids who get off the plane in Dutch Harbor get into trouble.

Other Problems

The participants at the public hearing identified the following problems in Dutch Harbor/Unalaska: child abuse; domestic violence (the need for a shelter); stress on workers who deal with substance issues and child abuse—particularly in the schools; FAS/FAE; accidents; and drownings.

Community Strengths

Substance Abuse Resources

The group participants value the services in their community, particularly the certified alcohol counselors (CACs) who are often recovering alcoholics, the efforts of the Blue Ribbon Sobriety Movement sponsored by AFN, and the focus on substance abuse gained from Red Ribbon Week.

School System

Group participants believe Unalaska is doing a good job with kids in the school, and reported activities have improved greatly since the arrival of the new administration. Teens say the school administration is good as is the vocational education program. One student said that the academic decathlon was a strength upon which people could build. One said, "There is a new focus on academics." Teens said teachers are accessible and provide strong guidance to students. They also said students have the ability to help each other, but often "it is hard to choose who to go to." One teen suggested that students lobby for increased funding for school programs.

Opportunities

Adult and Teen Activities

Group participants suggested developing activities, particularly for teens. They urged the Division of Family and Youth Services to coordinate their activities with more team work, particularly the services to children and adolescents coming out of abusive situations. Participants believe activities can be enhanced with the use of elders through the grandparents/adopt-a-grandparent/foster grandparent programs. These programs can also provide respite to exhausted working parents. Other activities suggested by group participants include developing a leadership camp. One participant said, "There was a large turnout in a previous camp, and it was well received by the community, but was too expensive." Also, suggested were increasing student input into Parks, Culture, and Recreation Center programs; opening a movie theater; and becoming a disk jockey at a local radio station.

School Improvements

Teen participants urged the school administration to strengthen college preparatory courses and class selection. One student said without this emphasis "the school doesn't challenge students." Teens also supported adding more classrooms, reinstating the academic decathlon, and increasing educational funding.

Education and Prevention

Group participants expressed a need for more emphasis on prevention campaigns. They said people have little to do in Unalaska in off-work hours and alcohol and other substance abuse becomes a replacement for other social activities. Occasionally, people get fired from their job as a result of substance abuse and some are stranded in Dutch Harbor/Unalaska. Group participants believed substance abuse education could alleviate these situations. Participants indicated processors on-shore currently have no employee assistance programs. They believe prevention and assistance activities in the workplace could provide another source of help to address thee problems in their community.

Yakutat

Yakutat, a town of 700 people, is located among the lowlands of the Gulf of Alaska between Cordova and Juneau; over half of the population is Alaska Native. Yakutat's economy is dependent upon fishing, fish processing and government. Recreational fishing and tourism are a growing part of the local economy. Yakutat has a well developed array of health and social services for a city its size. It has a fully functional community health center, with physician's assistants on staff, a substance abuse counseling service, a family counseling practitioner recently hired under a federal grant and a volunteer emergency search and rescue service. The Yakutat Tlingit Tribe is the principal provider of health and human services. The Yak-Tat Kwaan, Inc. is a visible and energetic Native regional corporation.

Community concerns

Housing Shortage

Group participants identified housing as a serious problem in Yakutat; housing is scarce, rents are high, and existing houses are old and poorly insulated. They also identified problems with non-conforming lots, sizing and zoning, or clouded titles. Much of the available land is owned by the federal, state or municipal government, making private, buildable land scarce. Consequently, many people live on boats in the harbor. Some help with housing has been provided by the Yakutat Tribe, the Bureau of Indian Affairs, and HUD. However, there has been little coordination between these agencies. Twenty units are under construction to provide some relief.

Changes in Subsistence Laws

Changes in subsistence laws have had a major impact on the lifestyles of Alaska Natives in Yakutat. The growth in the commercial fishing industry, and the sports fisheries, together with changes in fisheries laws and regulations, have reduced the ability of local subsistence users to provide for their families. There is no longer a guarantee of land or food.

Child Care

Many expressed a strong need for more child care in Yakutat.

Abuse

Participants identified the "code of silence" around all types of abuse as a problem in Yakutat. They said it is very difficult to talk about abuse. In recent years, the school has helped open discussion about abuse.

Jobs and the Fishing Industry

Many believe a stable and predictable income is hard to obtain, mostly because people in Yakutat are dependent on the fishing industry. The group discussed

issues of jobs and self-determination, and the need for relaxation of restrictions on the local fishing industry.

Substance Abuse

All participants agreed that substance abuse is a significant problem in Yakutat. They said alcohol is intimately connected to child abuse and neglect, poor school attendance, and family violence. Many participants had either lost a family member or loved one, or knew of someone who had died as a result of substance abuse.

The group discussed the notion of "community denial" around this issue. It was likened to the cycle of substance abuse, which includes individual denial. One said, "It's a small town - though we can see it [abuse], people don't want to admit it - little is done about it." Another said, "The reason we won't do anything about it is because we were taught not to offend others - people won't tell on each other."

Changing Culture

Group participants acknowledged that progress in the areas of abuse would be difficult, due in part to the Tlingit culture. As one participant stated, "Our people won't tell on each other." Another cultural aspect is the lack of Native identity due to the practice of sending youths to boarding schools. One participant said, "I wouldn't want to be on an island with a boy today, whether 10 or 19 - I'd spend all my time keeping him alive. They don't know what to do." There was additional discussion on the impact of the Christian missionaries on the traditional cultures.

Juvenile Crime

Teens noted that vandalism, shoplifting, breaking and entering, tire slashing, and other small property crimes are common in Yakutat. They described these crimes as "the things kids do when they are bored." Teens said there is not much to do other than get into trouble. They noted the lack of entertainment, especially on weekends and during the winter. One teen said, "When things get dull, things just happen." The teens said that when the Teen Center was started it was an "awesome place," they agreed since the manager quit - there hasn't been much going on there, and few teens attend. One participant said, "If somebody doesn't do something soon, something bad will happen."

Community Strengths

Strong School Health Curriculum

Group participants believe the health curriculum in the Yakutat School system is strong, and has been greatly improved by a local teacher. Sensitive subjects are openly discussed after information slips are sent home to parents, advising them about these sensitive subjects. If parents do not want their children exposed to

certain sections of the curriculum, they send the information slips back so indicating. Participants said the academic curriculum is strong, and are proud that so many children from Yakutat go to college, with many coming back to take local jobs.

Health and Human Service Provider Network

There is a growing and committed health and human service provider network, and a strong sense of commitment on the part of the community's leadership in dealing with issues of substance abuse.

Spiritual Strength

Native spirituality was identified as a key in helping resolve substance abuse problems in Yakutat. One participant said, "Spirituality is an important part of ourselves - we need to take care of this part." Traditional Native spirituality, and the western Christian spirituality are very strong.

Opportunities

Local Responsibility

Group participants said the community needs to regain local responsibility. Participants urged people in Yakutat to participate more in public meetings and forums, to become more politically aggressive, and to reduce the in-fighting reported in Yakutat politics. Many said participation in meetings could help prepare local delegations for state and regional meetings where Yakutat issues are discussed. They stressed the need for training young leaders as was done in the past.

Program Coordination

Many expressed the need for setting common goals and coordinating programs. Some suggested creating an information and referral manual to help coordinate the activities of service providers and church groups, and also help refer people to appropriate service.

Activities for Teens

Teen participants suggested activities and projects for teenagers including: develop sports activities for people who don't like basketball or track; form a dance group or stage a play; increase the hours for the open gym; reinstate swimming classes; join the band; reactivate the student council; put together a school newspaper, or dedicate a page of the local newspaper to teen issues; and hold more groups among the teens and then bring their concerns to the adults and elders. Teens also discussed the need to rejuvenate the Teen Center, suggesting longer hours, updated music, reinstatement of dances, and more adult supervision. They said teens need help or they will "go crazy," and suggest that adults donate more time.

Parenting Skills Enhancement

Participants suggested that to improve health problems such as substance abuse, parents need increased parenting skills. Participants said children were shipped to boarding schools and were never parented, which eroded traditional parenting skills. Many believe classes alone are insufficient, and said that the extended family is not there anymore to provide the type of 24-hour parenting, teaching, and assistance required. Participants suggested providing counseling and newsletters for new parents and high risk families, as well as education on how to operate a home.

Mental Health Substance Abuse Counseling and Treatment

Participants said Yakutat needs more programs to address the mental health and substance abuse counseling needs of the community. Alcohol treatment is available at the Yakutat Tribal offices, and is provided by the Southeast Alaska Regional Health Corporation, however, no state moneys are involved. Additional assistance is needed for health outreach to replace an expiring grant. Participants strongly recommended additional on-site training, mentoring, and supervision of health and human service personnel.

Economic Development

Group participants discussed at length the Yakutat fishing industry. Many recommended increasing local autonomy by forming a fisherman's union that would market more aggressively and help secure a favorable price on fish. To further enhance the industry, some suggested bringing trainers to Yakutat to teach fisherman new techniques, regulations, and marketing strategies. Participants also said there should be a stronger representation of Yakutat fishing interests on the state boards, not just on regional or state advisory councils. Participants acknowledged the economic potential of the tourism industry in Yakutat. However, some expressed concern about potential damage to the social fabric of the community. They also said tourism, particularly relating to recreational hunting and fishing, conflicts with the fishing industry and subsistence.

Child Care

Group participants believe child care is a major problem in Yakutat, and suggested creating a licensed child care facility in Yakutat. Currently, tribal funds are available to 4 or 5 families, but are insufficient for meeting child care needs in the community. A child care curriculum has been developed at the Yakutat High School, and is expected to help meet these needs. In addition, many believe it will help with the growing number of teen pregnancies; half of the pregnant teenage girls dropped out of high school.

Forgiveness

A principle theme was forgiveness. Participants said people should bury past transgressions of the church, and respect Native spirituality. They said, to do this they must forgive churches, parents, teachers, and most importantly, forgive themselves.

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